



CONCORD POLICE DEPARTMENT

219 Walden Street
P.O. Box 519
Concord Massachusetts 01742
Tel: (978) 318-3400 Fax: (978) 369-8420
Barry R. Neal Chief of Police



ACCIDENT REPORT REQUEST FORM

** There is a minimum of a \$5.00 fee for any records or background check that requires copies of log or officer reports payable by Check or Money Order only made out to the Town of Concord.*

DATE: _____

NAME: _____

ADDRESS: _____

CITY/TOWN: _____ STATE: _____ ZIP: _____

DOB: _____ SSN#: _____

PHONE #: _____ EMAIL: _____

DATE OF ACCIDENT: _____ TIME OF ACCIDENT: _____

LOCATION OF ACCIDENT: _____

REPORT # IF KNOWN: _____

SIGNATURE: _____ DATE: _____